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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Nelson, John, Robert, ,		
(b) Address (number and street) 2081 N. Oxnard Blvd. #111		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Oxnard CA 93036		2. Candidate's FEC Identification Number H8CA26130
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate CA 26	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) John Nelson For Congress		
(b) Address (number and street) 2081 N. Oxnard Blvd. #111		
(c) City, State, and ZIP Code Oxnard CA 93036		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State, and ZIP Code		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Nelson, John, , , [Electronically Filed]	Date 09/12/2017
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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